

# PREA AUDIT: AUDITOR'S SUMMARY REPORT

## ADULT PRISONS & JAILS



**[Following information to be populated automatically from pre-audit questionnaire]**

<b>Name of facility:</b>	Federal Bureau of Prisons, Federal Correctional Complex Petersburg		
<b>Physical address:</b>	1060 River Road, Hopewell, VA 23860		
<b>Date report submitted:</b>	March 26, 2015		
<b>Auditor Information</b>			
<b>Address:</b>	17566 E. 380 Road, Claremore, Oklahoma		
<b>Email:</b>	<a href="mailto:Pennylewis61@att.net">Pennylewis61@att.net</a>		
<b>Telephone number:</b>	(918) 519-2149		
<b>Date of facility visit:</b>	July 28-31, 2014		
<b>Facility Information</b>			
<b>Facility mailing address: (if different from above)</b>	Post Office Box 90026, Petersburg, VA. 23804		
<b>Telephone number:</b>	(206) 870-5700		
<b>The facility is:</b>	<input type="checkbox"/> Military	<input type="checkbox"/> County	<input checked="" type="checkbox"/> Federal
	<input type="checkbox"/> Private for profit	<input type="checkbox"/> Municipal	<input type="checkbox"/> State
	<input type="checkbox"/> Private not for profit		
<b>Facility Type:</b>	<input type="checkbox"/> Jail	<input checked="" type="checkbox"/> Prison	
<b>Name of PREA Compliance Manager:</b>	Allia Lewis		<b>Title:</b> Associate Warden
<b>Email address:</b>	PET/PREAComplianceMgr@bop.gov		<b>Telephone number:</b> (804) 733-7200
<b>Agency Information</b>			
<b>Name of agency:</b>	Federal Bureau of Prisons		
<b>Governing authority or parent agency: (if applicable)</b>	United States Department of Justice		
<b>Physical address:</b>	320 First Street., NW, Washington, DC 20534		
<b>Mailing address: (if different from above)</b>			
<b>Telephone number:</b>	(202) 307-3198		
<b>Agency Chief Executive Officer</b>			
<b>Name:</b> Charles E. Samuels	<b>Title:</b>	Director	
<b>Email address:</b> BOP-CPD/PREA COORDINATOR@BOP.GOV	<b>Telephone number:</b>	(202) 514-4919	
<b>Agency-Wide PREA Coordinator</b>			
<b>Name:</b> Alix McLearn	<b>Title:</b>	National PREA Coordinator	
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# AUDIT FINDINGS

## **NARRATIVE:**

The audit of was conducted on, July 29-31, 2014 by Penny Lewis, ACA/PREA Certified, Debbie Bell, ACA/PREA Certified Auditor, and Butch Widden, ACA/PREA auditor. The PREA audit for this facility was conducted in conjunction with the Intensive Review Program Audit, which requires a tour of the entire facility.

An entrance meeting was held with facility, bureau staff, to include the Bureau of Prison Program Reviewers and staff from the American Correctional Association. The following persons were in attendance: Butch Whidden, ACA/IRP Auditor, Debbie Bell, ACA/IRP Auditor, ACA staff; Doreen Efeti, Health Care Administrator-ACA, Ben Shelor, Deputy Director Accreditation-ACA, Brittany Power, ACA Accreditation Intern, FBOP Central Office staff; Joe Pecoraio, Administrator, External Auditing Branch, Central Office and Michelle R. Golliday, ACA Accreditation Manager, External Auditing Branch, Central Office, Program Review Team members John Watson, Examiner-UNICOR Section-RIC, Mark Bricker, Customer Service Supervisor-FCC-Butner, Brent Mulvaney, Quality Manager-Lexington, and facility staff; Eric D. Wilson, Warden, Allia Lewis, Associate Warden, Richard Engel, Associate Warden, Maurice Danzey, Associate Warden, Dennis Forman, Facility Manager, Robert Nannery, Safety Manager, Joanna Alderman, Unit Manager/Acting Executive Assistant, Wade Moore, Complex Unit Manager, Angela Tomlinson, Camp Case Manager, Tom Smith, General Foreman, John Kelly, Supervisor of Recreation, John Gradiska, Deputy Captain, Debra Dawson, Complex Captain, Nicole Cunningham, Human Resources Manager, Sam Westbrook, Print Plant Manager, Stephanie Timberlake, Unicor Factory Manager, and Richard Swann, Supervisory Production Controller.

Following the entrance meeting, the following staff accompanied the auditors on the facility tour Tuesday, July 29<sup>th</sup> from 8:00 a.m. to 4:00 p.m., Eric Wilson, Warden, Maurice Danzey, Associate Warden, Richard Engel, Associate Warden, Allia Lewis, Associate Warden, Debra Dawson, Complex Captain, John Kelly, Recreation Director, Robert Nannery, Safety Manager, Laurene Sharpe, Executive Assistant, Program Review Branch, John Gradiska, Deputy Captain, Wade Moore, Complex CMC, Dante Adkins, Lieutenant, Tom Smith Facilities Supervisor, Rodney Moore, Safety Specialist, Doreen Efeti, Health Care Administrator-ACA, Ben Shelor, Deputy Director Accreditation-ACA, Brittany Power, ACA Accreditation Intern, Joe Pecoraio, Administrator, External Auditing-BOP, Michelle Golliday, ACA Accreditation Manager, External Auditing-BOP.

Upon completion of the tour the first day, I requested a listing of offenders by housing units and randomly selected two inmates from each housing area as well as any inmates who were limited English speaking or had hearing/vision impairment to be interviewed. In addition, I requested to interview any transgender/intersex inmates housed at the facility. Interviews were scheduled for inmates as well as interviews with staff, both random and specialized. Staff interviews were conducted on all shifts utilizing staffing rosters. All required interviews were conducted onsite.

## **DESCRIPTION OF FACILITY CHARACTERISTICS:**

Consistent with the BOP mission, the mission of the FCC Petersburg is protecting the safety of the public; creating a positive safe work environment for staff that encourages and supports learning advancement, and diversity; creating a safe and secure environment for inmates that provide essential services and assists the offender in transitioning into incarceration; providing quality service to the federal courts, members of the federal family and law enforcement community; being a good employer, a being a good neighbor to the citizens of the Tri-Cities area, and a good public steward.

FCC Petersburg is located approximately 25 miles southeast of Richmond. FCC Petersburg has approximately 1,038,781 square feet under roof, consisting of 67 buildings. FCC Petersburg is comprised of a FCI Medium, FCI Low, and a Camp. The site is approximately 560 acres with 46 acres located within the secure perimeter of the FCI-Medium, and 28 acres located within the secure perimeter of the FCI-Low. The entire complex operates with shared services in the following areas: human resources, employee development, training, financial management, offender systems, psychology, health services, facilities, information technology, and religious services.

The FCI Low was initially constructed in 1930 as a federal road camp to alleviate overcrowding at USP Atlanta. In 1932, it was converted to an independent institution and renamed the "Petersburg Federal Reformatory Camp." Over the years, several additions and improvements have been added to include the addition of a camp. In 1994 the "Petersburg Federal Reformatory Camp" was re-designated as a low level security facility. Today the FCI Low looks like a college campus surrounded by two security fences with two access points; a pedestrian entrance and vehicle gate. Inside the perimeter are the administrative building, housing units, medical building, commissary, activities building (chapel and psychology), education building, UNICOR print plant, maintenance building, vocational shops, food service, gymnasium, and an outside recreation yard to include a ball fields and a weight pavilion. The housing units include: Richmond Hall is comprised of two floors with cells and open bays; Lee Hall is comprised of three floors, of open bays; Virginia Hall is comprised of two floors with rooms and cells; and three identical housing units, Columbia, Maryland and Delaware with multiple occupancy cells; and Carolina Hall is comprised of two floors, open bay living areas and one fourteen man cell. Each housing unit provides basic furnishing, common shower facilities and latrines, and TV multi-purpose areas. The perimeter was secured with wire fencing and razor wire.

The FCI medium security facility was constructed in 2001 as a Bureau of Prisons response to absorbing the District of Columbia offenders. An administrative building is outside the facility and serves as pedestrian entrance into the facility. The facility is surrounded by a high security fencing system using razor ribbon, electronic intrusion and two armed patrols. A vehicle gate is located on the south side of the facility, controlling vehicle traffic into the facility for deliveries and pickup along with emergency vehicle access into the facility. Central control located in the back of the administrative building controls access into the secure perimeter. A walkway from the administrative building leads to the next perimeter, which is all the facility buildings. On the left, just before the gate is access for visitors to the visitation room. Offenders enter from the secure side of the visitation room. Clockwise from the visitation room a series of connected buildings that includes education, vocational training, and UNICOR. On the South side of the perimeter in order, continuing clockwise is the commissary, laundry, food service and maintenance area. On the west side is the three housing units. There is a fence connecting the food service area to the first housing area, between housing areas and on the north side of the complex a fence from the last housing unit to the recreation building. The three housing buildings are divided into six housing units. Each unit is further divided into a North and South side. Each side has two floors. The upper

units (B, D and F units) have 36 two-man cells, 20 three-man cells, and 8 four-man cells. The lower units (A, C, and E South units) have 42 two-man cells, and 23 three-man cells and 4 four-man cells. The E North Unit is the RDAP unit and consists of 29 two-man cells, 23 three-man cells and 4 four-man cells. Cells provide basic hygiene and room furnishings in the cells, with common shower facilities. Each unit provides basic furnishing, common shower facilities, multi-purpose rooms, day rooms with televisions and phones, correctional officer station, and office space for staff. A hallway between units is additional office space, meeting rooms and closets. Just prior to the recreation building is a gate leading to the outside recreation area that includes ball fields and handball courts. The recreation building includes a gym, craft shops, music rooms, and card area. Just adjacent to the recreation building is the special housing unit. The special housing unit has two corridors, each with two floors of cells. A control room has views down each corridor and controls access into the special housing unit, into each corridor, and each cell. All are two man cells. Showers are on the end of the tier along with a meeting room. There are seven outside recreation cages in the special housing unit. Health services are next to segregation and across from visitation. It is well laid out with numerous patient rooms, specialty rooms, pharmacy, records room, dental suite, and administrative offices. The courtyard is a combination of sidewalks leading to the buildings and grass and flowers that are well maintained and provides a campus like atmosphere.

The camp is located across the street from the FCI Low entrance and consists of four buildings and a covered weight area. From the left to right is the housing unit, commissary and visitation building, a building that has education, health services, psychology, chapel and recreation located in it, and food service building. The camp housing unit has five floors of open bays and cubicle areas. Each floor provides basic furnishing, common shower facilities and latrines, and TV multi-purpose areas.

Outside buildings include facility and UNICOR warehouses, garage, powerhouse, training center, maintenance shops, weapons range and staff houses.

#### **SUMMARY OF AUDIT FINDINGS:**

The onsite visit was completed at the FCC Petersburg on July 31, 2014. The results indicate FCC Petersburg's compliance levels on the following number of standards.

Number of standards exceeded: 3

Number of standards met: 39

Number of standards not met: 0

Number of standards not applicable: 1

### **§115.11 - Zero Tolerance of Sexual Abuse and Sexual Harassment; PREA Coordinator**

☐ Exceeds Standard (substantially exceeds requirement of standard)

X Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

☐ Does Not Meet Standard (requires corrective action)

### **§115.12 - Contracting with Other Entities for the Confinement of Inmates**

X Exceeds Standard (substantially exceeds requirement of standard)

☐ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

☐ Does Not Meet Standard (requires corrective action)

Federal Bureau of Prisons was proactive and, as of February 1, 2013, renewed all existing contracts to include PREA requirements and policy. Contract monitoring is in the contract to be done through on site visits and PREA documentation/audits.

### **§115.13 – Supervision and Monitoring**

X Exceeds Standard (substantially exceeds requirement of standard)

☐ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

☐ Does Not Meet Standard (requires corrective action)

Quarterly staffing meetings are held to review the current staffing plan and salaries. Additionally, the PREA manager attends the Annual Manpower Utilization Committee reviews staffing levels, salary projections, and vacancies taking into account established criteria; one being 100% staffing in Correctional Services and Psychology to support goals set for PREA compliance.

Program Statement 5312.11, dated January 6, 2014, requires Institutional Duty Officers to conduct unannounced rounds, which are documented utilizing the "Institutional Duty Officer Unannounced Rounds" form.

### **§115.14 – Youthful Inmates**

☐ Exceeds Standard (substantially exceeds requirement of standard)

☐ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

☐ Does Not Meet Standard (requires corrective action)

**N/A** No Youthful Offenders at this facility

### **§115.15 – Limits to Cross-Gender Viewing and Searches**

☐ Exceeds Standard (substantially exceeds requirement of standard)

X Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

☐ Does Not Meet Standard (requires corrective action)

### **§115.16 – Inmates with Disabilities and Inmates Who are Limited English Proficient**

☐ Exceeds Standard (substantially exceeds requirement of standard)

X Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

☐ Does Not Meet Standard (requires corrective action)

### **§115.17 – Hiring and Promotion Decisions**

☐ Exceeds Standard (substantially exceeds requirement of standard)

X Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

☐ Does Not Meet Standard (requires corrective action)

### **§115.18 – Upgrades to Facilities and Technology**

☐ Exceeds Standard (substantially exceeds requirement of standard)

X Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

☐ Does Not Meet Standard (requires corrective action)

### **§115.21 – Evidence Protocol and Forensic Medical Examinations**

☐ Exceeds Standard (substantially exceeds requirement of standard)

X Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

☐ Does Not Meet Standard (requires corrective action)

### **§115.22 – Policies to Ensure Referrals of Allegations for Investigations**

☐ Exceeds Standard (substantially exceeds requirement of standard)

X Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

☐ Does Not Meet Standard (requires corrective action)

### **§115.31 – Employee Training**

☐ Exceeds Standard (substantially exceeds requirement of standard)

X Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

☐ Does Not Meet Standard (requires corrective action)

### **§115.32– Volunteer and Contractor Training**

☐ Exceeds Standard (substantially exceeds requirement of standard)

X Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

☐ Does Not Meet Standard (requires corrective action)

### **§115.33 – Inmate Education**

☐ Exceeds Standard (substantially exceeds requirement of standard)

X Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

☐ Does Not Meet Standard (requires corrective action)

### **§115.34 – Specialized Training: Investigations**

☐ Exceeds Standard (substantially exceeds requirement of standard)

X Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

☐ Does Not Meet Standard (requires corrective action)

### **§115.35 – Specialized Training: Medical and Mental Health Care**

☐ Exceeds Standard (substantially exceeds requirement of standard)

X Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

☐ Does Not Meet Standard (requires corrective action)

### **§115.41 – Screening for Risk of Victimization and Abusiveness**

☐ Exceeds Standard (substantially exceeds requirement of standard)

X Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

☐ Does Not Meet Standard (requires corrective action)

115.41 (d) requires, in part: “whether the inmate is or is perceived to be gay, lesbian, bisexual, intersex, or gender nonconforming;”

P5324.11 requires “All inmates entering an institution are screened as directed by Health Services, Psychology Services and Unit Management policies.” Staff are required to utilize the “Intake Screening” program statement, which outlines the issues and steps to take during the intake screening process. Additionally, the “Intake Screening Form” is accompanied by the “PREA Intake Objective Screening Instrument” for guidance.

The instructions for the completion of the screening form has objective criteria, which states that *LGBTI status* is based on documents received (e.g. PSR) or correctional judgment would indicate the inmate would have issues being placed in general population. Neither the “objective criteria” or associated “referral guidance” information is directly related to the standard requirement. Additionally, the intake screening form does not require the screener, directly or indirectly, to solicit a response from the inmate during the intake process.

During the corrective action period, the facility provided the new guidelines issued on September 11, 2014 (Intake Screening Guidance- Prison Rape Elimination Act) as well as information for the screener to provide clarification to the inmate, if needed which options may be provided for the inmate to choose (ie; lesbian, gay heterosexual etc.).

#### **§115.42 – Use of Screening Information**

☐ Exceeds Standard (substantially exceeds requirement of standard)

X Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

☐ Does Not Meet Standard (requires corrective action)

#### **§115.43 – Protective Custody**

☐ Exceeds Standard (substantially exceeds requirement of standard)

X Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

☐ Does Not Meet Standard (requires corrective action)

#### **§115.51 – Inmate Reporting**

☐ Exceeds Standard (substantially exceeds requirement of standard)

X Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

☐ Does Not Meet Standard (requires corrective action)

#### **§115.52 – Exhaustion of Administrative Remedies**

☐ Exceeds Standard (substantially exceeds requirement of standard)

X Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)



☐ Does Not Meet Standard (requires corrective action)

### **§115.53 – Inmate Access to Outside Confidential Support Services**

☐ Exceeds Standard (substantially exceeds requirement of standard)

X Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

☐ Does Not Meet Standard (requires corrective action)

### **§115.54 – Third-Party Reporting**

☐ Exceeds Standard (substantially exceeds requirement of standard)

X Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

☐ Does Not Meet Standard (requires corrective action)

### **§115.61 – Staff and Agency Reporting Duties**

☐ Exceeds Standard (substantially exceeds requirement of standard)

X Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

☐ Does Not Meet Standard (requires corrective action)

### **§115.62 – Agency Protection Duties**

☐ Exceeds Standard (substantially exceeds requirement of standard)

X Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

☐ Does Not Meet Standard (requires corrective action)

### **§115.63 – Reporting to Other Confinement Facilities**

☐ Exceeds Standard (substantially exceeds requirement of standard)

X Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

☐ Does Not Meet Standard (requires corrective action)

### **§115.64 – Staff First Responder Duties**

X Exceeds Standard (substantially exceeds requirement of standard)

☐ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

☐ Does Not Meet Standard (requires corrective action)

PS 5324.09 and FCC Petersburg response plan demonstrates compliance. Staff interviews demonstrated that they are knowledgeable of their duties as a first responder. Staff are given laminated cards, which identifies the check sheet for their duties.

#### **§115.65 – Coordinated Response**

☐ Exceeds Standard (substantially exceeds requirement of standard)

X Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

☐ Does Not Meet Standard (requires corrective action)

#### **§115.66 – Preservation of Ability to Protect Inmates from Contact With Abusers**

☐ Exceeds Standard (substantially exceeds requirement of standard)

X Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

☐ Does Not Meet Standard (requires corrective action)

#### **§115.67 – Agency Protection Against Retaliation**

☐ Exceeds Standard (substantially exceeds requirement of standard)

X Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

☐ Does Not Meet Standard (requires corrective action)

#### **§115.68 – Post-Allegation Protective Custody**

☐ Exceeds Standard (substantially exceeds requirement of standard)

X Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

☐ Does Not Meet Standard (requires corrective action)

#### **§115.71 – Criminal and Administrative Agency Investigations**

☐ Exceeds Standard (substantially exceeds requirement of standard)

X Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

☐ Does Not Meet Standard (requires corrective action)

#### **§115.72 – Evidentiary Standard for Administrative Investigations**

☐ Exceeds Standard (substantially exceeds requirement of standard)

X Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

☐ Does Not Meet Standard (requires corrective action)

### **§115.73 – Reporting to Inmate**

☐ Exceeds Standard (substantially exceeds requirement of standard)

X Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

☐ Does Not Meet Standard (requires corrective action)

### **§115.76 – Disciplinary Sanctions for Staff**

☐ Exceeds Standard (substantially exceeds requirement of standard)

X Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

☐ Does Not Meet Standard (requires corrective action)

### **§115.77 – Corrective Action for Contractors and Volunteers**

☐ Exceeds Standard (substantially exceeds requirement of standard)

X Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

☐ Does Not Meet Standard (requires corrective action)

### **§115.78 – Disciplinary Sanctions for Inmates**

☐ Exceeds Standard (substantially exceeds requirement of standard)

X Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

☐ Does Not Meet Standard (requires corrective action)

### **§115.81 – Medical and Mental Health Screenings; History of Sexual Abuse**

☐ Exceeds Standard (substantially exceeds requirement of standard)

X Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

☐ Does Not Meet Standard (requires corrective action)

### **§115.82 – Access to Emergency Medical and Mental Health Services**

☐ Exceeds Standard (substantially exceeds requirement of standard)

X Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

☐ Does Not Meet Standard (requires corrective action)

### **§115.83 – Ongoing Medical and Mental Health Care for Sexual Abuse Victims and Abusers**

☐ Exceeds Standard (substantially exceeds requirement of standard)

X Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

☐ Does Not Meet Standard (requires corrective action)

### **§115.86 – Sexual Abuse Incident Reviews**

☐ Exceeds Standard (substantially exceeds requirement of standard)

X Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

☐ Does Not Meet Standard (requires corrective action)

### **§115.87 – Data Collection**

☐ Exceeds Standard (substantially exceeds requirement of standard)

X Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

☐ Does Not Meet Standard (requires corrective action)

### **§115.88 – Data Review for Corrective Action**

☐ Exceeds Standard (substantially exceeds requirement of standard)

X Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

☐ Does Not Meet Standard (requires corrective action)

### **§115.89 – Data Storage, Publication, and Destruction**

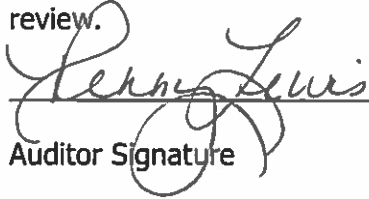
☐ Exceeds Standard (substantially exceeds requirement of standard)

X Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

☐ Does Not Meet Standard (requires corrective action)

**AUDITOR CERTIFICATION:**

The auditor certifies that the contents of the report are accurate to the best of his/her knowledge and no conflict of interest exists with respect to his or her ability to conduct an audit of the agency under review.



Auditor Signature

March 26, 2015

Date